

Town Supervisor  
**Kevin J. Tollisen**

# TOWN of HALFMOON

Town Board  
**Paul Hotaling**  
**Daphne Jordan**  
**John Wasielewski**  
**Jeremy Connors**



Recreation Office  
**Amanda Smith, Recreation Director**  
**Haylie Sullivan, Recreation Assistant**

**2 HALFMOON TOWN PLAZA**  
**HALFMOON, NY 12065**  
**COUNTY OF SARATOGA**

asmith@townofhalfmoon.org  
(518) 371-7410 Ext. 2272 • Fax (518) 371-0936

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## 2017 “Learn to Ski / Snowboard Program” at Willard Mountain

Enclosed please find each of the following:

- Town of Halfmoon Ski Program Registration Form and Insurance Release {yellow}-**ONE PER FAMILY**
- Willard Mountain Rental Agreement and Release Form {blue}- **ONE PER SKIER**
- Additional information supplied by Willard Mountain {white}

Our program will begin on Saturday, January 7, 2017 and will continue for six consecutive **Saturdays** ending with the session on February 11, 2017 (weather permitting). The program will run from **1:30pm to 5:30pm**, lesson times are **2:00pm to 3:30pm**. The bus will leave the Town Hall parking lot {Harris Road} at **12:30pm** and return at approximately **6:30pm**.

**PARENTS:** PLEASE BE AWARE OF THE PROGRAM TIMES AND BE SURE TO MEET YOUR CHILD **ON TIME**.

### HOW TO REGISTER:

- Fill out the Halfmoon Registration & Insurance Form {**YELLOW – FRONT & BACK**} in their entirety- **ONE PER FAMILY** (Each participant over the age of 18 must sign)
- Fill out the Willard Mountain Ski School Program Registration- **ONE PER SKIER**
  - Please circle:
    - Skier or Snowboarder
    - The program/equipment desired
    - Experience Level
  - Please be sure to sign under the warning disclaimer (marked with an X)
  - **If you are going to rent**, please be sure to complete the bottom section and sign
- Mail or drop off completed forms, including your payment to the Recreation Department at the above address; **deadline for completed applications is Thursday, November 10th**. ***Payments in the form of cash, check (made out to the Town of Halfmoon) or credit card (must be done in person in the Recreation office).***

Please read the additional information provided by Willard Mountain. Tips for a smooth season and program benefits are explained. For additional information or registration forms, please call the Recreation Department at 371-7410, ext. 2272.

DATE \_\_\_\_\_ CASH \_\_\_\_\_ CHECK # \_\_\_\_\_ CHECK AMT \_\_\_\_\_ CREDIT \_\_\_\_\_

## Town of Halfmoon Learn to Ski Registration Form

Please place \$ amount in the desired program for each participant

**\*Little Colonel (ages 4-7 ONLY)\***

Skier's Name (First & Last)	Age	Lift Only <b>\$165</b>	Lift & Ski Rental <b>\$190</b>	Lift & Snowboard Rental <b>\$190</b>	Lift & Lesson <b>ONLY</b> <b>\$190</b>	Lift, Lesson, Ski Rental <b>\$250</b>	Lift, Lesson, Snowboard Rental <b>\$250</b>	*Lift & Lesson* <b>\$190</b>	*Lift, Lesson & Rental* <b>\$220</b>	Total Cost

YOUTHS UNDER 12: **MUST** BE ACCOMPANIED BY ADULT AT ALL TIMES

ADDRESS \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

**Legal Guardian**

Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Phone #2 \_\_\_\_\_

Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Phone #2 \_\_\_\_\_

**Emergency Contact**

Name: \_\_\_\_\_ Phone #1 \_\_\_\_\_ Phone #2 \_\_\_\_\_

Name: \_\_\_\_\_ Phone #1 \_\_\_\_\_ Phone #2 \_\_\_\_\_

Subtotal	
Registration Fee Per Skier	_____ @\$45=
Grand Total	

I hereby acknowledge the risk in winter skiing and recognize that the Town of Halfmoon will not be supervising skiers at the ski mountain. However, in the event of injury to my child or myself, I authorize the Town of Halfmoon and its agents to take the steps deemed necessary to provide medical care, treatment and transportation for individual safety and wellbeing. I have read, acknowledged, and signed the attached letter in reference to insurance regulations and further agree that the Town will not be responsible for my child or myself while active at the facility. I will hold the Town of Halfmoon harmless from any and all claims, which may arise from my child or my own participation in this program and use of the facility.

**Please note, each adult skier must sign below (over the age of 18).**

Skier's Signature \_\_\_\_\_

Parent's Signature (if skier under 18) \_\_\_\_\_

Skier's Signature \_\_\_\_\_

Skier's Signature \_\_\_\_\_

**Please turn over to sign the transportation release**

## Insurance Release Form

October 2016

Dear Parent or Guardian,

The Halfmoon Learn to Ski Program, which is offered annually by the Town of Halfmoon Recreation Department, will again be conducted this year.

However, due to insurance regulations and problems, the Town is not able to obtain insurance which will protect the participants while they are on the mountain or at the ski facility. The only insurance that the Town is able to obtain would apply only while the participants are in transit on the bus.

This is certainly an issue that we want you to be aware of. We do not supervise the participants once they leave the bus. Once they are on the mountain, they are under the supervision of Willard Mountain. They will not be supervised by the Town of Halfmoon Recreation personnel.

This letter is to serve as an acknowledgement, to go along with the release that you are signing, that the Town does not supervise participants while on the mountain or participating in any activity at the Ski Facility.

Sincerely,

**Amanda Smith**

Amanda Smith  
Recreation Director

Received, Read & Acknowledged on \_\_\_\_\_, 2016.

**Please check one:**

YES, I will be using the bus transportation \_\_\_\_\_ If yes, how many? \_\_\_\_\_

NO, I will provide my own transportation \_\_\_\_\_

\_\_\_\_\_  
Adult **Skier's** Signature

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_  
Adult **Skier's** Signature

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_  
Adult **Skier's** Signature

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_  
**GUARDIAN'S** Signature (if skier is under 18)

\_\_\_\_\_  
Please Print Name